

PROJECT 10073 RECORD

1. DATE - TIME GROUP 2 Jun 67 02/0415Z	2. LOCATION McKeesport, Pennsylvania (2 Witnesses)
3. SOURCE Civilian	10. CONCLUSION Other (CONFLICTING DATA) ✓
4. NUMBER OF OBJECTS 1	
5. LENGTH OF OBSERVATION 3 Seconds	11. BRIEF SUMMARY AND ANALYSIS SEE CASE FILE
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE W - E	CONCLUSION: In letter from one observer, he stated, "Object came down toward earth and for some reason, made a 90 deg get away," (direction unknown), and in form 164 from second observer, he stated, "there was no motion or change of course"
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

FORM

FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

20. Do you think you can estimate the speed of the object?

(Circle One) ☒ Yes ☐ No

IF you answered YES, then what speed would you estimate? 200 MPH

21. Do you think you can estimate how far away from you the object was?

(Circle One) Yes ☒ No

IF you answered YES, then how far away would you say it was? _____

22. Where were you located when you saw the object?
(Circle One):

- a. Inside a building
- b. In a car
- c. ☒ Outdoors
- d. In an airplane (type) _____
- e. At sea
- f. Other _____

23. Were you (Circle One)

- a. In the business section of a city?
- b. ☒ In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- | | | | |
|--------------|--------------|--------------|--------------|
| a. North | c. East | e. South | g. West |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

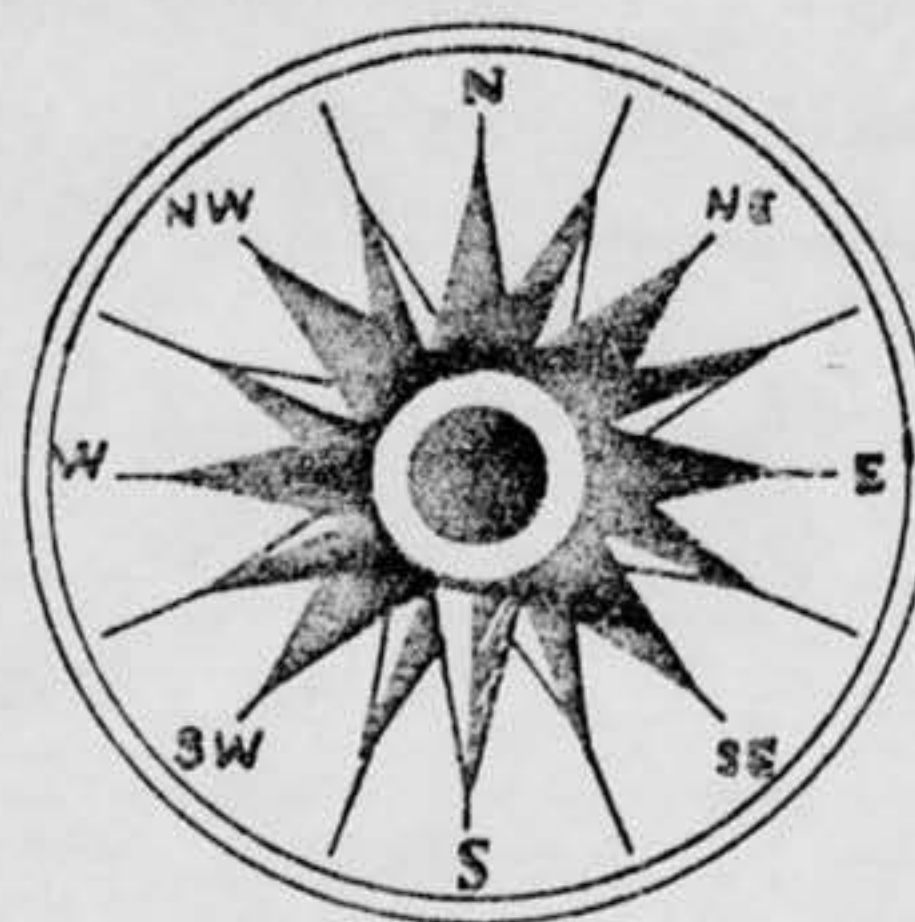
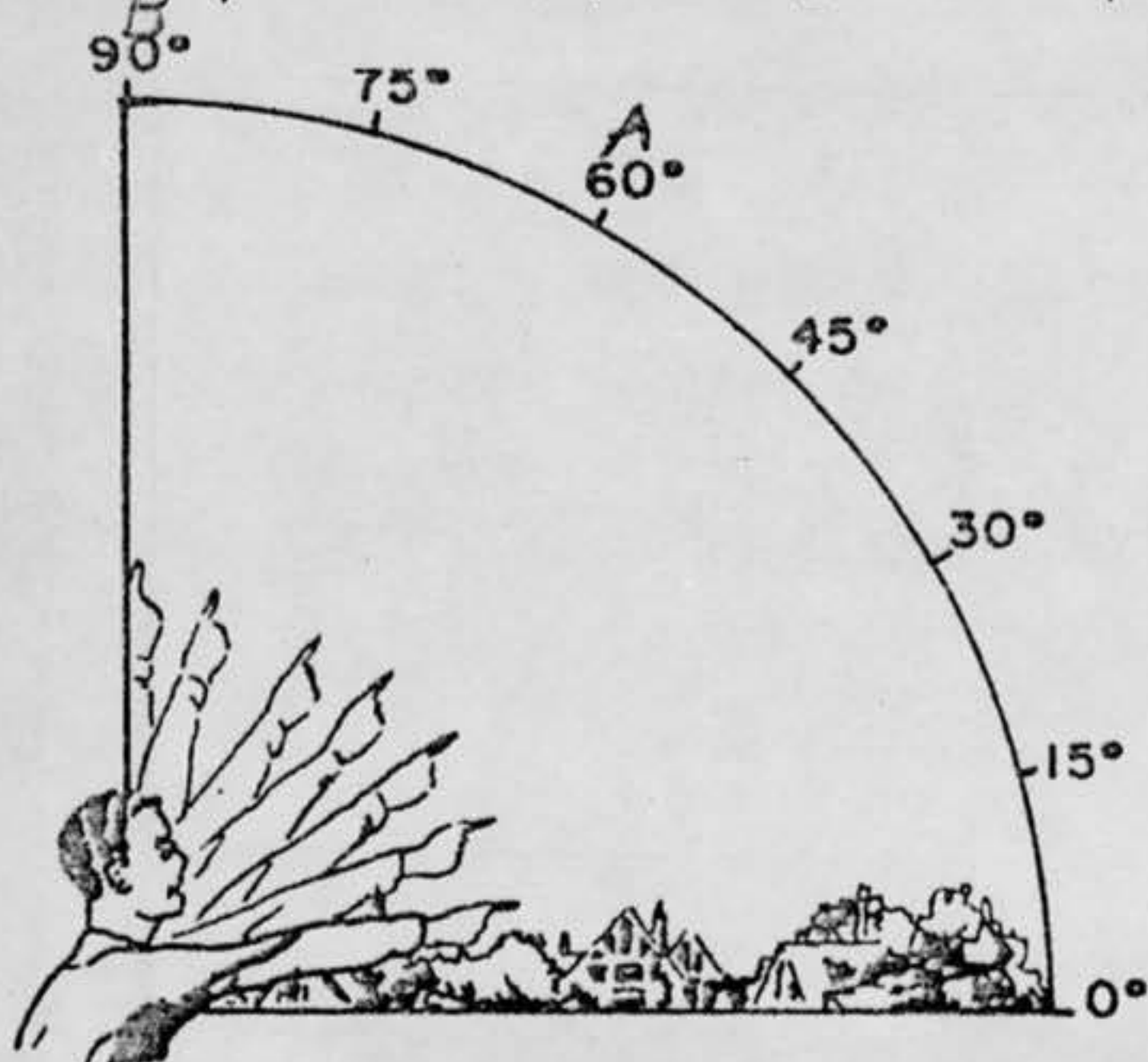
(Circle One) Yes ☐ No ☒

25. Did you observe the object through any of the following?

- | | | | | | |
|-----------------|-----|-------------------------------------|---------------|------------------|-------------------------------------|
| a. Eyeglasses | Yes | <input checked="" type="radio"/> No | e. Binoculars | Yes | <input checked="" type="radio"/> No |
| b. Sun glasses | Yes | <input checked="" type="radio"/> No | f. Telescope | Yes | <input checked="" type="radio"/> No |
| c. Windshield | Yes | <input checked="" type="radio"/> No | g. Theodolite | Yes | <input checked="" type="radio"/> No |
| d. Window glass | Yes | <input checked="" type="radio"/> No | h. Other | <u>NAKED EYE</u> | |

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

A

B

29. IF there was MORE THAN ONE object, then how many were there? _____

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? (Circle One) ☒ Yes ☐ No

31.1 IF you answered YES, did they see the object too? (Circle One) ☒ Yes ☐ No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

City

Zone

State

TELEPHONE NUMBER

AGE

SEX

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

3
Day

June
Month

1967
Year

Sent Letter To

AIR FORCE

34. Date you completed this questionnaire:

25

Day

8

Month

1967

Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

2 JUNE 1967
Day Month Year

2. Time of day: 11 : 45
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern
b. Central
c. Mountain
d. Pacific
e. Other _____

(Circle One): a. Daylight Saving
b. Standard

4. Where were you when you saw the object?

Nearest Postal Address City or Town State or County

McKEESPORT PA.

5. How long was object in sight? (Total Duration)

Hours Minutes Seconds

a. Certain
b. Fairly certain
c. Not very sure
d. Just a guess

5.1 How was time in sight determined? I counted

5.2 Was object in sight continuously? Yes _____ No ✓

6. What was the condition of the sky?

DAY NIGHT
a. Bright a. Bright
b. Cloudy b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you
b. In back of you
c. To your right
d. To your left
e. Overhead
f. Don't remember

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

It was a fairly bright yellow

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
 - b. Like a bright star
 - c. Sharply outlined
 - d. Don't remember

e. Other It left contrails

13. Did the object:

(Circle One for each question)

- | | | | |
|-------------------------------------------------|------------|-----------|------------|
| a. Appear to stand still at any time? | Yes | <u>No</u> | Don't know |
| b. Suddenly speed up and rush away at any time? | <u>Yes</u> | No | Don't know |
| c. Break up into parts or explode? | Yes | <u>No</u> | Don't know |
| d. Give off smoke? | Yes | <u>No</u> | Don't know |
| e. Change brightness? | <u>Yes</u> | No | Don't know |
| f. Change shape? | Yes | <u>No</u> | Don't know |
| g. Flash or flicker? | <u>Yes</u> | No | Don't know |
| h. Disappear and reappear? | Yes | <u>No</u> | Don't know |

14. Did the object disappear while you were watching it? If so, how?

It came over very fast as I counted and suddenly it and the contrails disappeared

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

☒ No

Don't Know.

IF you answered YES, then tell what

it moved behind: _____

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

☒ No

Don't Know.

IF you answered YES, then tell what

in front of: _____

17. Tell in a few words the following things about the object:

a. Sound

none

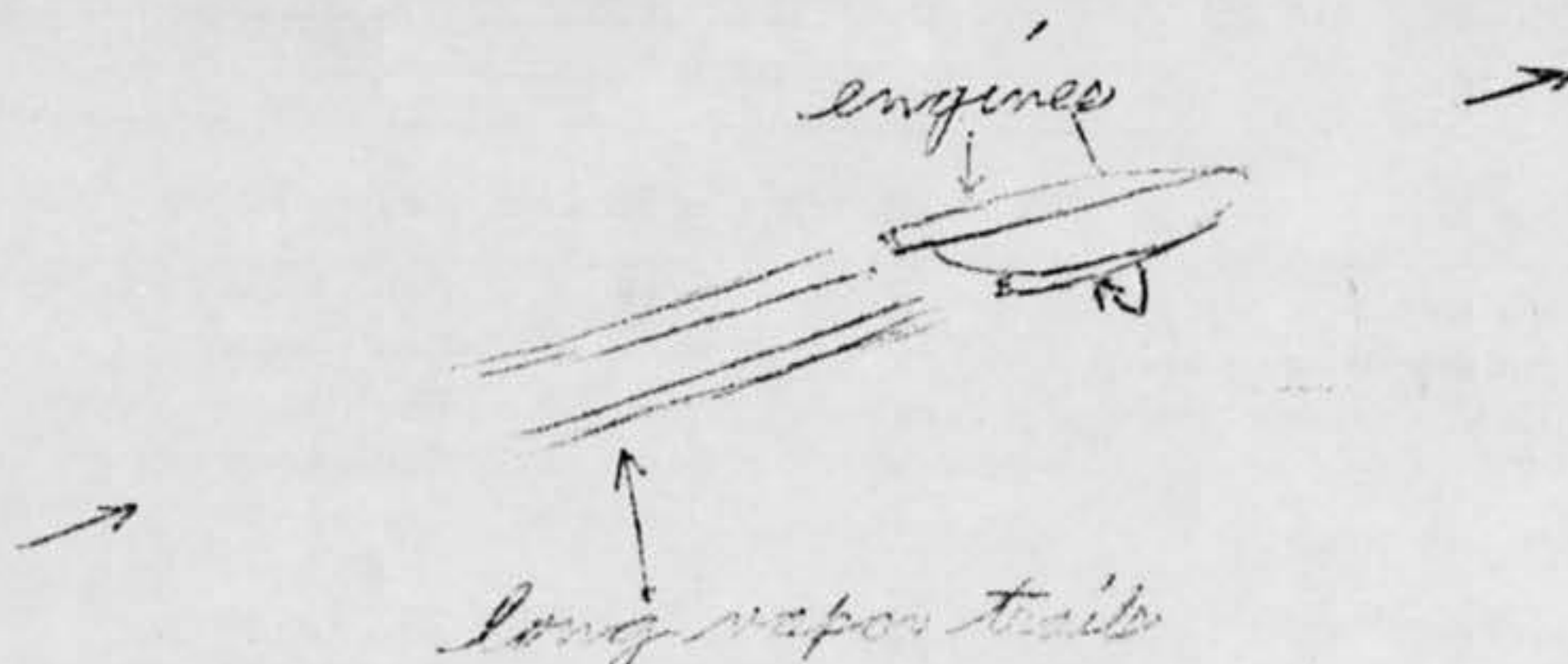
b. Color

bright yellow

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

over half

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.



20. Do you think you can estimate the speed of the object?

(Circle One)

Yes

No

IF you answered YES, then what speed would you estimate? 450 MPH

21. Do you think you can estimate how far away from you the object was?

(Circle One)

Yes

No

IF you answered YES, then how far away would you say it was? 400 yds

22. Where were you located when you saw the object?
(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane (type)
- e. At sea
- f. Other _____

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- | | | | |
|--------------|--------------|--------------|--------------|
| a. North | c. East | e. South | g. West |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

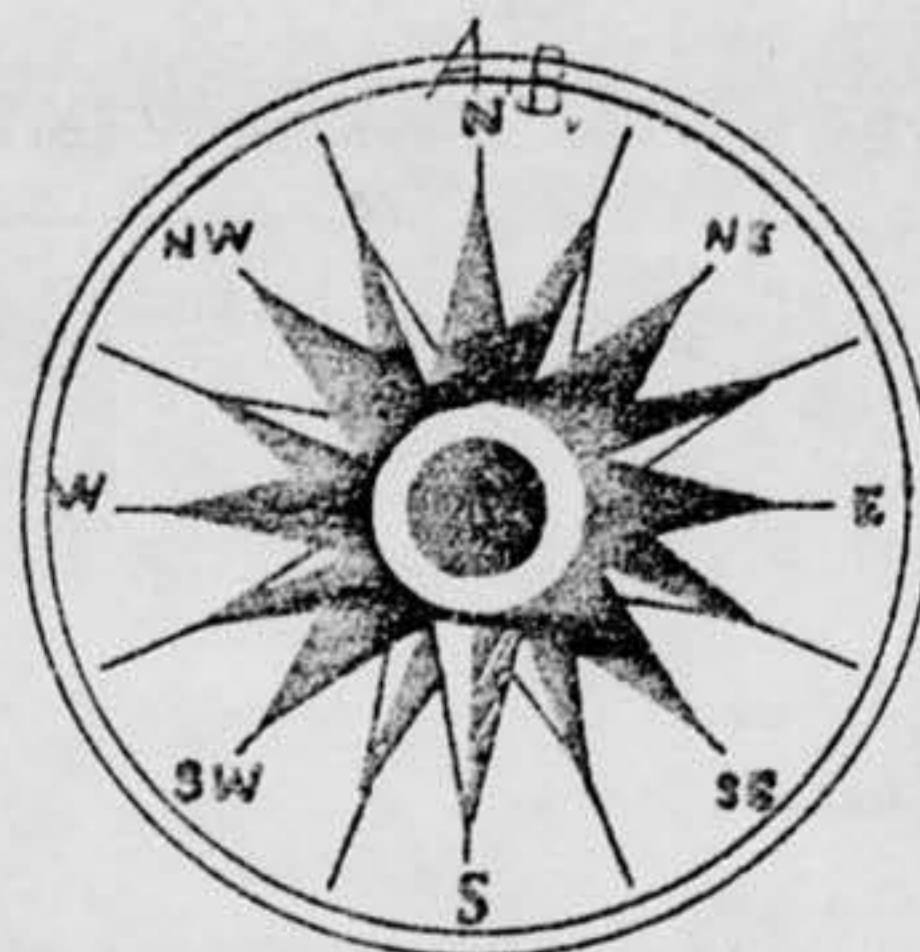
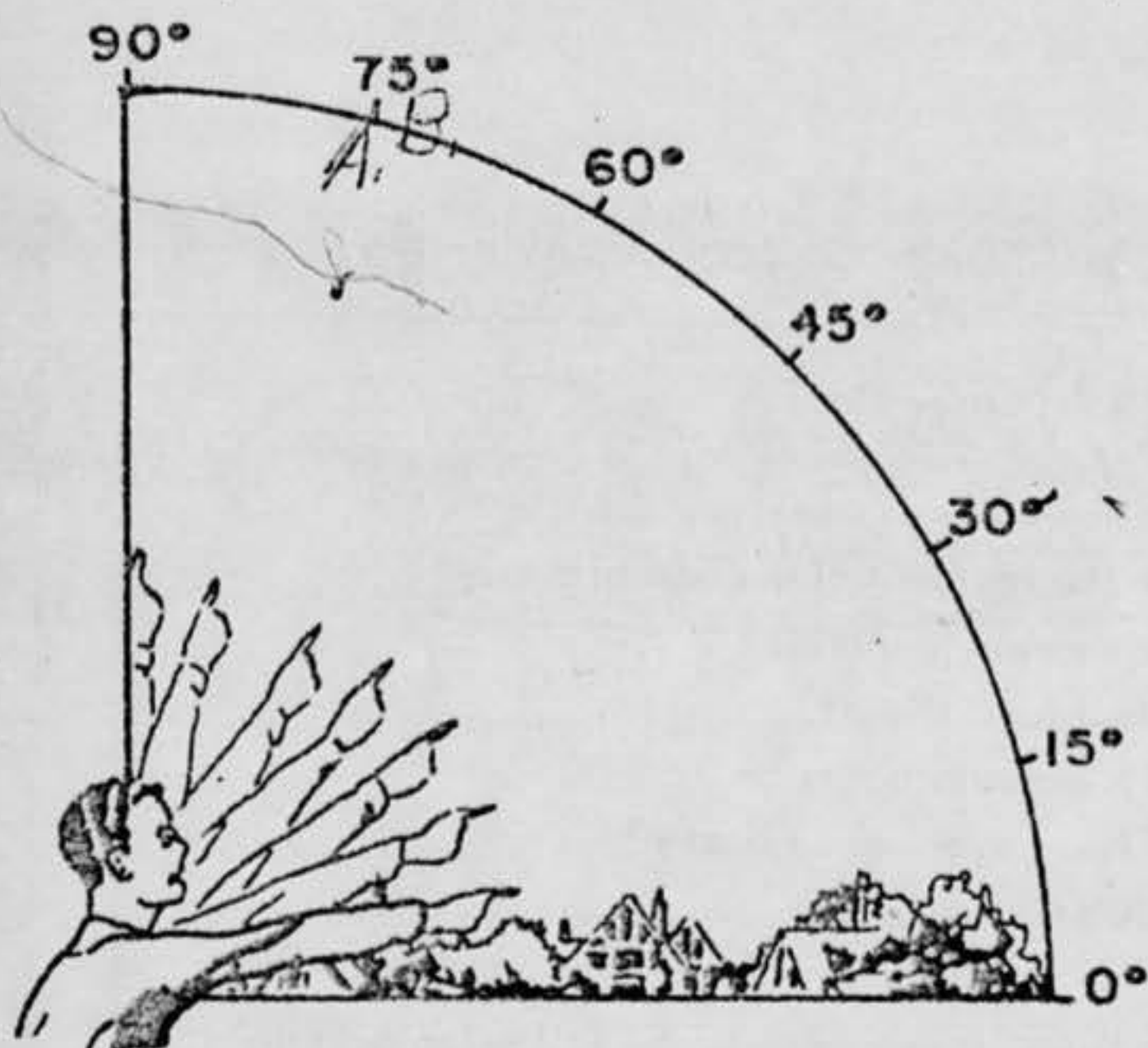
25. Did you observe the object through any of the following?

- | | | | | | |
|-----------------|------------|----|----------------|-----|----|
| a. Eyeglasses | <u>Yes</u> | No | e. Binoculars | Yes | No |
| b. Sun glasses | Yes | No | f. Telescope | Yes | No |
| c. Windshield | Yes | No | g. Theodolite | Yes | No |
| d. Window glass | Yes | No | h. Other _____ | | |

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

B-70
~~YF-12A~~ with out fuselage ahead
of wing and tail fins

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

there was no motion or change of course



29. IF there was MORE THAN ONE object, then how many were there? _____

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

no

31. Was anyone else with you at the time you saw the object? (Circle One)

Yes

No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

31.2 Please list their names and addresses:

[REDACTED]

[REDACTED]

[REDACTED]

Street

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

City

Zone

State

TELEPHONE NUMBER

NONE

AGE

16

SEX

BOY

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

Day

Month

Year

I didn't my friend did

December 30, 1967

*See Dr. Hyndes Dec. 67 Bill for services
kecs*

Report on the June 2, 1967, McE~~st~~port, Pennsylvania case. I believe that this can be classified as "probable meteor". The shortness of duration (3 to 6 seconds depending on observer), the fact that it left trails all fits in with the meteor picture. Two witnesses disagree as to the matter of motion and I think we can discount the 90° turn reported by one since no mention whatever is made of it by the second observer. The second observer, in fact, states that there was no motion or change of course. I do not think he means in this case that there was no motion, but rather that there was no change from straight line motion. That is, no zigzagging or abrupt turns or speeding up or slowing down. In short, I could easily defend the evaluation of this case as a bright

meteor before any panel of experts.

34. Date you completed this questionnaire:

12
Day

Sept.
Month

1961
Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

*questionnaire was not accounted for
until above date*

~~READING~~

2 June 67

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433



REPLY TO
ATTN OF TDET/UFO

AUG 24 1967

SUBJECT UFO Observation 2 Jun 67

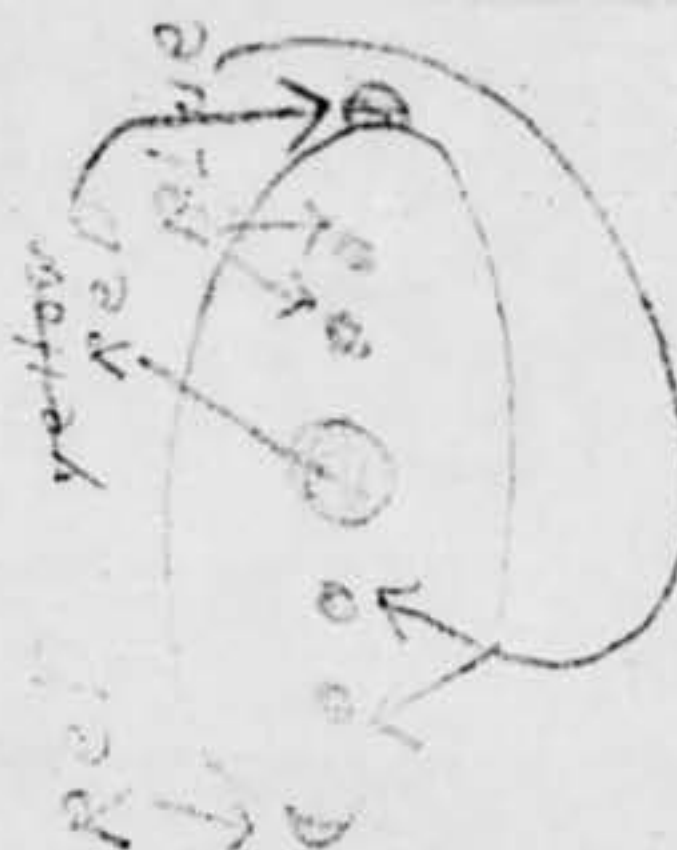
[REDACTED]
McKeesport, Pennsylvania 15132

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

J. Quintanilla
JAMES C. MANATT, Colonel, USAF
Director of Technology and Subsystems

1 Atch
FTD Form 164 w/envelope

*Jan 19 1967
Hawthorn, so 19
Cooked, 1967
201*



pg 1.

~~W.A.A.~~

~~[REDACTED]~~

Mc Keesport, Pa

time	11:58 P.M.
date	6/2/67
temperature	60°
weather	clear skies

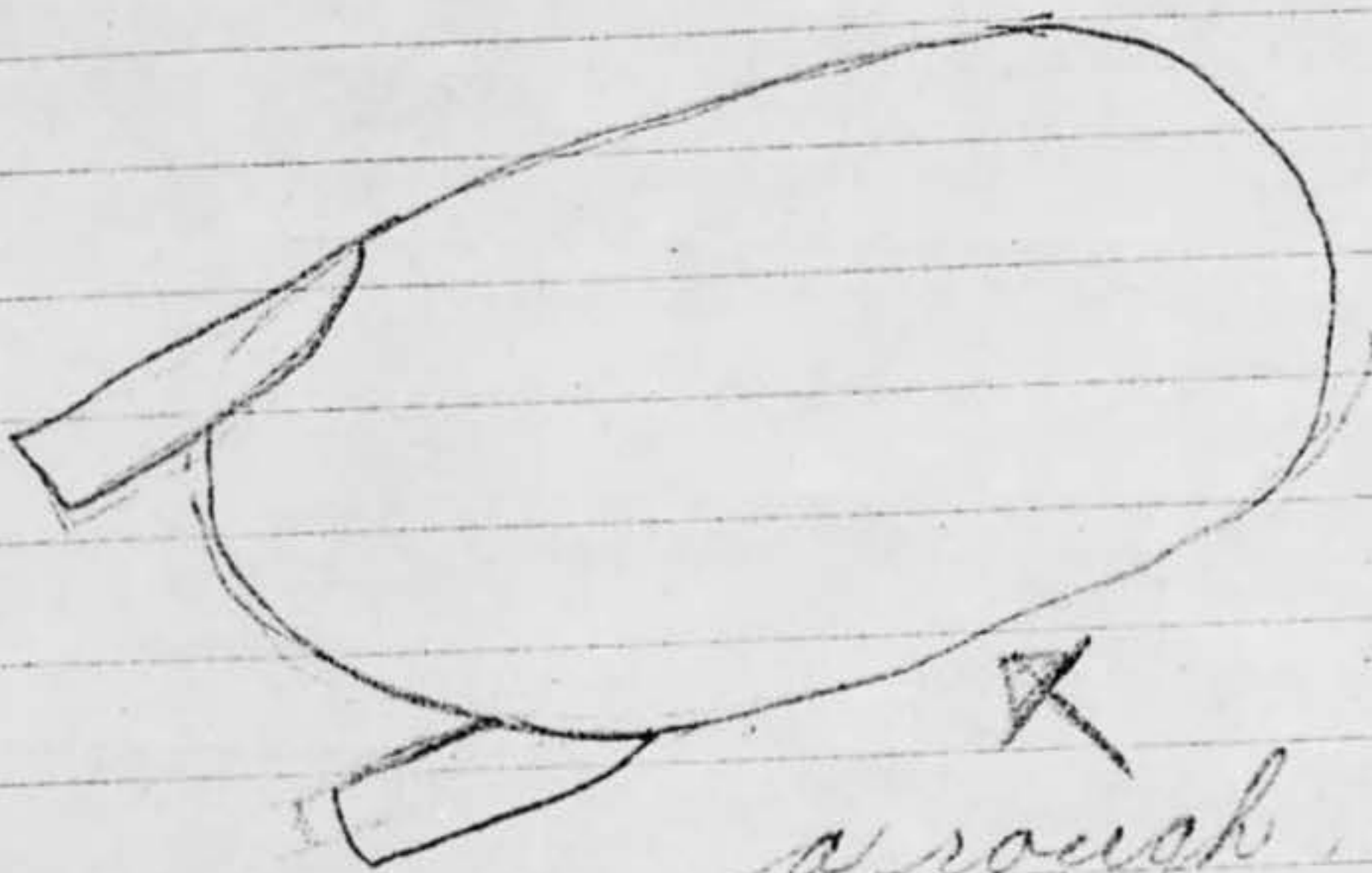
164

pg. 2

On the night of June 2, 1967 Bill and I were standing in front of my house talking. Suddenly Bill shouted "What's that" and pointed in the south east. I looked in the same direction he pointed, and here's what I saw: a disk shape, fireball looking object. It was moving about 60 mph and from the ground it appeared 2' long and 1' wide.

It came down toward earth and for some reason made a 90° turn away. It moved with no sound. The next ^{day} another told me he saw the same thing.

pg 3.



a rough
sketch
of the object
we saw

It was bright
yellow and was far
brighter than anything in
the sky.

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will *not* be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

2 Day June Month 1967 Year

2. Time of day: 12 Hour 15 Minutes

(Circle One): (A.M.) or P.M.

3. Time Zone:

(Circle One): a. Eastern
b. Central
c. Mountain
d. Pacific
e. Other _____

(Circle One): a. Daylight Saving
b. Standard

4. Where were you when you saw the object?

[REDACTED] St. Nearest Postal Address McKeesport City or Town PA. State or County

5. How long was object in sight? (Total Duration)

3 Hours 0 Minutes 0 Seconds

a. Certain (C) Not very sure
b. Fairly certain d. Just a guess

5.1 How was time in sight determined? _____

5.2 Was object in sight continuously? Yes X No _____

6. What was the condition of the sky?

DAY
a. Bright
b. Cloudy

(NIGHT)
a. Bright
b. Cloudy

dark, clear

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you d. To your left
b. In back of you e. Overhead
c. To your right f. Don't remember

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

BRIGHTER THAN A FULL MOON AT MIDNIGHT

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
 - b. Like a bright star
 - c. Sharply outlined
 - d. Don't remember

e. Other _____

13. Did the object:

(Circle One for each question)

- | | | | |
|-------------------------------------------------|------------|-----------|------------|
| a. Appear to stand still at any time? | Yes | <u>No</u> | Don't know |
| b. Suddenly speed up and rush away at any time? | <u>Yes</u> | No | Don't know |
| c. Break up into parts or explode? | <u>Yes</u> | <u>No</u> | Don't know |
| d. Give off smoke? | <u>Yes</u> | No | Don't know |
| e. Change brightness? | <u>Yes</u> | <u>No</u> | Don't know |
| f. Change shape? | Yes | <u>No</u> | Don't know |
| g. Flash or flicker? | Yes | <u>No</u> | Don't know |
| h. Disappear and reappear? | Yes | <u>No</u> | Don't know |

14. Did the object disappear while you were watching it? If so, how?

*a 90° turn
STRAIGHT UP*

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

it moved behind: _____

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

in front of: _____

17. Tell in a few words the following things about the object:

a. Sound *NONE*

b. Color *LUMINOUS YELLOW DECORATED WITH RED, BLUE
'LIGHTS'*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

*TWICE THE
FULL LENGTH OF THE
MATCH STICK*

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.

*YELLOW
(BRIGHT)*